



2622  
J. K.

## TRANSMITTAL FORM

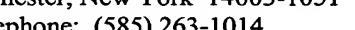
*(to be used for all correspondence after initial filing)*

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/055,189	
		Filing Date	January 25, 2002	
		First Named Inventor	Campbell et al.	
		Group Art Unit	2622	
		Examiner Name	To Be Assigned	
Total Number of Pages in This Submission		4 pages and 1 cited reference	Attorney Docket Number	1508/3550 (D/A 1496)

**ENCLOSURES** *(check all that apply)*

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> A copy of the Notice to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input checked="" type="checkbox"/> A self-addressed, prepaid postcard for acknowledging receipt <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>  PTO-1449 (1 page) (in duplicate)  1 cited reference
Remarks <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 14-1138 for the above identified docket number		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	<p>Gunnar G. Leinberg          Nixon Peabody LLP          Clinton Square, P.O. Box 31051          Rochester, New York 14603-1051          Telephone: (585) 263-1014          Fax: (585) 263-1600</p>
Signature	
	Registration No. 35,584
Date	

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

I hereby certify that this correspondence is being:

deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450

transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) \_\_\_\_\_.

12/15/04  
Date

Mary Yandow  
Signature  
Mary Yandow  
Typed or printed name



PATENT  
Docket No.: 1508/3550 (D/A 1496)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Campbell et al.	)	Examiner:
	)	To Be Assigned
Serial No. : 10/055,189	)	Art Unit:
	)	2622
Cnfrm. No. : 9199	)	
	)	
Filed : January 25, 2002	)	
	)	
For : A METHOD AND SYSTEM FOR SHOPPING	)	
FOR A CONSUMABLE FOR A DEVICE	)	
	)	

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT  
UNDER 37 CFR §§ 1.97-1.98**

**Mail Stop: Amendment**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In compliance with 37 C.F.R. 1.56, 1.97, and 1.98, published art included in the European Search Report (copy enclosed) of the corresponding European application, is cited for consideration and listed on the enclosed PTO-1449 form.

The European Search report identifies 1 (one) reference. This reference is relevant for the reasons given in the search report.

I hereby certify that the item contained in this information disclosure statement were cited in the European Search Report mailed September 15, 2004 in the corresponding European application, which is less than three months prior to the filing date of this statement.

It is our understanding that no fee is required as this Information Disclosure Statement is being filed within three months of the date of mailing of the European Search

Report. However, in the event that a fee is necessary, the Commissioner is authorized to charge PTO Account No. 14-1138 for any such fee.

Respectfully submitted,

Date: Dec. 14, 2004

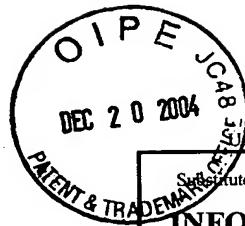
Gunnar Leinberg  
Gunnar G. Leinberg  
Registration No. 35,584

NIXON PEABODY LLP  
Clinton Square, P.O. Box 31051  
Rochester, New York 14603  
Telephone: (585) 263-1014  
Facsimile: (585) 263-1600

Certificate of Mailing - 37 CFR 1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450, on the date below.

Date 12/15/04 | Mary Yandow  
Mary Yandow



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449A/PTO				Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				Application Number	10/055,189
(use as many sheets as necessary)				Filing Date	January 25, 2002
				First Named Inventor	Campbell et al.
				Art Unit	2622
				Examiner Name	To Be Assigned
Sheet	1	of	1	Attorney Docket Number	1508/3550 (D/A 1496)

U.S. PATENT DOCUMENTS						
Examiner Initials*	Cite No. <sup>1</sup>	U.S. Patent Document		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number - Kind Code <sup>2</sup> (if known)				
	US-					
	US-					
	US-					
	US-					
	US-					
	US-					
	US-					
	US-					
	US-					
	US-					

FOREIGN PATENT DOCUMENTS							
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Country Code <sup>3</sup>	Number <sup>4</sup> Kind Code <sup>5</sup> (if known)				
1	EP 0 843 229 A2	05/20/1998	Europe				

OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS						
Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.				T <sup>2</sup>

Examiner Signature	Date Considered
--------------------	-----------------

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.